

To:	Nova Southeastern University Academic Advising National Graduate Teacher Education Program		
Fax:	(954) 262-2338		
Phone:	(800) 986-3223 ex. 1559	1	
From:—		Date:	
Contact	Phone: Day ()	Evening ()	
Return	Fax Number: <u>(    )</u>	NSU ID#	
Total Pa	ges: (inc	uding cover sheet)	

Memo:



## NOVA SOUTHEASTERN UNIVERSITY FISCHLER SCHOOL OF EDUCATION AND HUMAN SERVICES

## National Graduate Teacher Education Program (NGTE)

Main Bldg. First Floor, Academic Advising 1750 NE 167<sup>th</sup> Street North Miami Beach, FL 33162-3017 Fax: 954-262-2338 Phone: (954) 262-1559 or (800) 986-3223, Ext 1559 (U.S.)

## **REQUEST FOR TRANSFER OF CREDIT**

Date		
Name	NSU ID#	
Address		
Street	Apt#	
City	State	Zip
e-mail address		
Degree M.S. / Ed.S. (circle one) Majo	r	
Area of Certification (please fill in)		Temp.() Prof.()
Official Transcript from	Norra of College / University	
	Name of College / University	
Please indicate NSU courses you wish to waiver:		
M.S 3 credits 3 credits	Ed.S 3 credits	3 credits

- A program outline will be provided by your advisor.
- Transfer of credit must be approved by your advisor.
- Complete this form and fax or mail to the advising team.
- You will be notified of acceptance of transfer of credits.